

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								SERIAL NO. <i>09/619,771</i>	FILING DATE <i>7-20-08</i>				
								APPLICANT(S)					
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.		
(1)							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
(10)							60						
(11)							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
(20)							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
(29)							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	5												
TOTAL DEP.	24												
TOTAL CLAIMS	29												

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